RECEIVEL
FEBERAL ELECTION
COMPASSION
PUBLIC DISCLODURE
DIVISION

2016 MAY 19 PM 2: 33

Committee Name:
Great America Movement
If registered, FEC ID:
81-2401341
Today's Date:
4/26/2016
Federal Election Commission
999 E Street, N.W.
Washington, D.C. 20463
Re: Form 1, Statement of Organization—Unlimited Contributions
To Whom It May Concern:
This committee intends to make independent expenditures, and consistent with
the U.S. Court of Appeals for the District of Columbia Circuit decision in
SpeechNow v. FEC, it therefore intends to raise funds in unlimited amounts. This
committee will not use those funds to make contributions, whether direct, in-kind,
or via coordinated communications, to federal candidates or committees.
Respectfully submitted,
And but down Mr.
Øreasurer's Name
Guido George Lombardi , Treasurer

FEC

Office

Use

Only

STATEMENT OF **ORGANIZATION**

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2016 MAY 19 AM 11:50

FEC FORM 1

(Revised 06/2012)

FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full). is changed) over the lines. Great America Movement 150 Bradley Place ADDRESS (number and street) (Check if address is changed) Palm Beach STATE A ZIP CODE A CITY A COMMITTEE'S E-MAIL ADDRESS ,glandgl@hotmail.com (Check if address 19 0 0 0 0 0 0 0 1 0 1 5 is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) 2. DATE 2016 3. FEC IDENTIFICATION NUMBER > IS THIS STATEMENT OR AMENDED (A) NEW (N) I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete. Guido George Lombardi Type or Print Name of Treasurer 2016 Signature of Treasurer NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. ANY CHANGE IN INFORMATION SHOULD BE-REPORTED WITHIN 10 DAYS.

For further information contact:

Federal Election Commission

Toll Free 800-424-9530

Local 202-694-1100

FE	C For	m 1 (Revised 02/2009)		Page 2				
TYPE (OF CO	DMMITTEE						
Candi	Candidate Committee:							
(a)		This committee is a principal campaign com	mittee. (Complete the candidate information be	elow.)				
/h)		This constitute is an authorized according	and is NOT a satisfical compains according					
(b)		information below.)	and is NOT a principal campaign committee. (Complete the candidate				
Name o								
Candida	ale							
Candida		Office	Francy Constant	State				
Party A	iiiialic	n Sought:	House Senate Preside	District				
(c)		This committee supports/opposes only one of	candidate, and is NOT an authorized committed	e				
Name o Candida								
Party	Com	mittee:	14.1119 (199 ₄₎	ir, saugamentaliti tersiya mayaramidi ere ere mayarlad da e ere ere e				
(d)		ki #	tional, State subordinate) committee of the	(Democratic, Republican, etc.) Party				
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Politic	al A	ction Committee (PAC):						
(e)		This committee is a separate segregated fur	nd. (Identify connected organization on line 6.) Its	s connected organization is				
		Corporation	Corporation w/o Capital Stock	Labor Organization				
		Membership Organization	Trade Association	Cooperative				
		In addition, this committee is a	a Lobbyist/Registrant PAC.					
(1)	X	This committee supports/opposes more than committee. (i.e., nonconnected committee)	n one Federal candidate, and is NOT a separa	te segregated fund or party				
			41D					
		In addition, this committee is a Lobbyi	st/Hegistrant PAC.					
		In addition, this committee is a Leader	ship PAC. (Identify sponsor on line 6.)					
Joint F	Fund	raising Representative:						
(g)	arel .	•	ndraising expenses and disburses net proceeds	for two or more political				
(9)			th is an authorized committee of a federal candid					
(h) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or								
Ę	ტი. ა⊈	committees/organizations, none of which is an authorized committee of a federal candidate.						
	Comi	mittees Participating in Joint Fundraiser						
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	4.		FEC ID number C					

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_	FEC Form 1 (Revise	d 02/2009)	Page 3
٧	Vrite or Type Committee Na	ame	
(Great America	a Movement	
6.	Name of Any Connected	d Organization, Affiliated Committee, Joint Fundraising Representative, or Lea	adership PAC Sponsor
,N	IONE	·	
L			
L			
	Mailing Address		
	<u> </u>		
		CITY STATE	ZIP CODE
	Dolotionahin	nted Occasionation for Affiliated Committees for leight Fundationing Population	Londorship DAC Sponsor
	Relationship: Connec	cted Organization Affiliated Committee Joint Fundraising Representative	Leadership PAC Sponsor
_			
7.	Custodian of Records: le books and records.	dentify by name, address (phone number optional) and position of the person i	in possession of committee
	Guido (George Lombardi	
	Full Name		
	Mailing Address	150 Bradley Place	
		Palm Beach	480
		· · · · · · · · · · · · · · · · · · ·	
	Title or Position	CITY STATE .	ZIP CODE
	Treasurer	Telephone number	-1 , , 1-1 , , , 1
		Teleprone number	
8.	Treasurer: List the name any designated agent (e.g	and address (phone number optional) of the treasurer of the committee; and to assistant treasurer).	he name and address of
	Full Name Guido C	George Lombardi	
	Mailing Address	150 Bradley Place	
		·	
		Palm Beach	180 , , , , , , , , , , , , , , , , , , ,
	Title or Position	Palm Beach FL 334	180 ZIP CODE

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PREPARER	5/19/16 DATE PREPARED					
(3/2015)						